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TRANSMITTAL FORM <small>(to be used for all correspondence after initial filing)</small>	Application Number	10/813,518	
	Filing Date	03/30/2004	
	First Named Inventor	Santa Cruz, Michael	
	Art Unit	3811	
	Examiner Name	Silbermann, Joanne	
Total Number of Pages in This Submission	6	Attorney Docket Number	256.100

ENCLOSURES (Check all that apply)		
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Remarks Form SB 21 Transmittal = 1 page Amendment & Reply = 5 pages		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual	Michael A. Shippey
Signature	<i>Michael A. Shippey</i>
Date	06/09/2005

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Date: Thursday, June 09, 2005 Application No.: 10/813,518 Filed: 03/30/2004
Examiner Joanne Silbermann Art Unit 3611 Office Action dated 03/09/2005
In re the Application of: Michael Santa Cruz For: **HAND GESTURE RECEIVER**
Attorney Docket number: 256.100

REPLY AND AMENDMENT

Commissioner for Patents
Alexandria, VA 22313-1450

Sir:

Please amend this application, in the claims, as set forth on the following pages, and consider the remarks extended on behalf of the instant application. The claims are amended to conform to current amendment practice.

Respectfully yours,

Michael A. Shippey
Michael A. Shippey

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